

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Lynn A. Lafferty

Mailing Address 1 Boca Ciega Point Blvd

City

Saint Petersburg

State

FL

Zip Code

33708-2744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 7

Transaction ID: C1612217

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Robert W. Leadbetter

Mailing Address 2440 Madison St

City

Hollywood

State

FL

Zip Code

33020-5327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Sign Language Interpreter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 7

Transaction ID: C1524117

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Monroe W. W Mack

Mailing Address 3002 W Saint Conrad St

City

Tampa

State

FL

Zip Code

33607-2955

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 7

Transaction ID: C1612160

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....